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Please type a plus sign (+) in this box Approved for use through 09/30/2000 OMB 0651-0032 PTO/SB/05 (12/97)
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

09.29.00 A

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. TI-31683
		First Named Inventor or Application Identifier Nikolaus P.W. Almasy
		Title SYSTEM AND METHOD FOR ADAPTIVE DEEP-SLEEP SLOTTED OPERATION
		Express Mail Label No. EL213565196US

APPLICATION ELEMENTS <small>See MPEP Chapter 600 concerning utility patent application contents</small>		ADDRESS TO:	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
2. <input checked="" type="checkbox"/> Specification <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		[Total Pages] 29	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
			7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ol style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identical of above copies
ACCOMPANYING APPLICATION PARTS			
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC d113)		[Total Sheets] 5	8. <input type="checkbox"/> Assignment Papers (cover sheet & Documents(s))
4. Oath or Declaration		[Total Pages] 1	9. <input type="checkbox"/> 37 CFR §3.73(b) Statement <small>(when there is an assignee)</small> <input checked="" type="checkbox"/> Power of Attorney
a. <input checked="" type="checkbox"/> Newly Executed (original or copy)			10. <input type="checkbox"/> English Translation Document (if applicable)
b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small>			11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449
			12. <input type="checkbox"/> Preliminary Amendment
			13. <input checked="" type="checkbox"/> 2 Return Receipt Postcards (MPEP 503) <small>(Should be specifically itemized)</small>
			14. <input type="checkbox"/> Small Entity Statement(s)
			15. <input type="checkbox"/> Statement filed in prior application <small>(PTO/SB/09-12)</small>
			16. <input checked="" type="checkbox"/> Status still proper and desired <small>(PTO/SB/09-12)</small> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>
			Other: Check # 455545 for \$870.00
<small>*A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.</small>			
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: / Prior application information: Examiner _____ Group / Art Unit: _____			

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	<input checked="" type="checkbox"/> Correspondence address below		
(Insert Customer No. or Attach bar code label here)			
NAME	Ronald O. Neerings Texas Instruments Incorporated		
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Name (Print/Type)	Terrance A. Meador	Registration No. (Attorney/Agent)	30,298
Signature	<i>Terrance A. Meador</i>		Date 28 September 2000

09.29.00

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PTO/SB/17 (1/98)

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

Complete If Known

Application Number	To be assigned
Filing Date	Herewith
First Named Inventor	Nikolaus Almassy
Examiner Name	Unknown
Group / Art Unit	Unknown
Attorney Docket No.	TI-31683/DOT1540

TOTAL AMOUNT OF PAYMENT

(\$ 870.00)

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge to the following Deposit Account,

Deposit Account Number	07-1895
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Deposit Account Name	Gray Cary Ware & Freidenrich
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- Charge any additional fee required or credit any overpayment Charge all indicated fees and any additional fee required or credit any overpayment

2. Payment Enclosed:

<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other
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FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension of time within second month	
117	950	217	475	Extension of time within third month	
118	1,510	218	755	Extension of time within fourth month	
128	2,060	228	1,030	Extension of time within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,320	241	660	Petition to revive - unintentional	
142	1,320	242	660	Utility issue fee (or reissue)	
143	450	243	225	Design issue fee	
144	670	244	335	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt.	
581	40	581	40	Recording each patent assignment per property (time number of properties)	
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	
149	790	249	395	For each additional invention to be	

FEE CALCULATION**1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	790	201	395	Utility filing fee	\$690
106	330	206	165	Design filing fee	\$
107	540	207	270	Plant filing fee	\$
108	790	208	395	Reissue filing fee	\$
114	150	214	75	Provisional filing fee	\$
SUBTOTAL (1)				(\$690)	

2. EXTRA CLAIM FEES

Total Claims	-20** =	Extra Claims	Fee from below	Fee Paid
		10	x 18	= 180
Independent Claims	-3** =	0	x 78	= 0
Multiple Dependent			0	= 0

**or number previously paid, if greater; For Reissue, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	22	203	11	Claims in excess of 20
102	82	202	41	Independent Claims in excess of 3
104	270	204	135	Multiple dependent claims in excess of 3
109	82	209	41	**Reissue independent claims over original patent
110	22	210	11	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$180)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$180)

SUBMITTED BY				Complete (if applicable)
Typed or Printed Name	TERRANCE A. MEADOR			Reg. Number 30,298
Signature	Terrance A. Meador			Date 28 September 2000
				Deposit Account User ID

EL213565196US

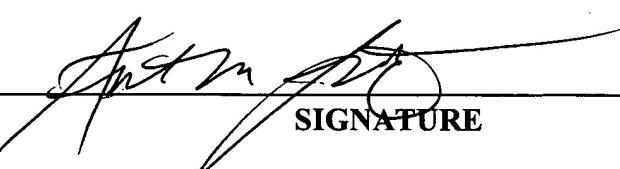
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DATE OF DEPOSIT: 28 September 2000 _____

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Antoinette Littlefield

NAME



SIGNATURE